What is an Ombudsman?

Each Managed Care Organization (MCO) contracted with New Mexico’s Centennial Care Medicaid program is required to have an Ombudsman. Access to the Ombudsman is available at no cost to all Centennial Care members.

The Ombudsman explores problems and works independently to find an impartial solution. They advocate for the member’s rights by using Medicaid guidelines and resources from the Managed Care Organization (MCO) where they work. The Ombudsman is separate from the MCO’s Grievance and Appeals process.

How can an Ombudsman help?

They can help with:

- Reviewing and addressing your concerns regarding accessing services
- Helping you to receive prompt attention from MCO care coordinators and other appropriate personnel
- Addressing your concerns about benefits you feel should be covered but were denied
- Helping you understand or clarifying your rights and responsibilities under Centennial Care
- Helping understand covered services that are available to you
- Helping you understand the pros and cons of your possible options
- Helping you understand MCO policies and procedures
- Helping you research claims issues
- Helping you with the appeals and grievance process

How can someone reach an Ombudsman?

Contact an Ombudsman by email or by phone:

**Blue Cross Blue Shield of New Mexico**
888-243-1134
nmcentennialcareombudsman@bcbsnm.com

**Presbyterian Health Plan**
505-923-5780
ombudsman@phs.org

**Western Sky Community Care**
844-225-6672
ombudsman@westernskycommunitycare.com

Questions?

Call the CDD Information Network
1-800-552-8195
or visit our website at www.cdd.unm.edu/infonet

Informational Tip Sheets:
www.cdd.unm.edu/infonet/tip-sheets.html

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